| APPLICATION NO.  |             | SCANNED                             | 1 <sup>3</sup> a.s. L | A          | TENT DATE                  |                     |  |
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| APPLICATION NO. CONT/PRIOR 09/658245   |             | CLASS<br>379                        | SUBCLASS              | ART UNIT   | EXAMINER                   | EXAMINER            |  |
| APPLICANTS  Lester Nels  Daniel Swin  Tomas Sokol  | ehart<br>er |                                     |                       |            | ing convers                | etima               |  |
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| ISSUING CLASSIFICATION   |             |                                     |                       |            | ERENCE(S)                  |                     |  |
| ORIGINAL   | SUBCLASS    |                                     |                       |            | SUBCLASS PER BLOCK)        |                     |  |
| INTERNATIONAL CL   | ASSIFICATIO | NC                                  |                       |            |                            |                     |  |
|  |             |                                     |                       |            | Continued on Issue Slip    | Inside File Jacket  |  |
| TERMINAL DISCLAIMER  |             | DRAWINGS                            |                       |            | CLAIMS ALLOWED             |                     |  |
|  |             | Sheets Drwg.                        | Figs. Drwg.           | Print Fig. | Total Claims               | Print Claim for O.C |  |
| The term of this patent subsequent to (date) has been disclaimed.                            |             |                                     |                       |            | NOTICE OF ALLOWANCE MAILED |                     |  |
|  |             | (Assistant Examiner) (Date)         |                       |            |                            |                     |  |
| The term of this patent shall<br>not extend beyond the expiration date<br>of U.S Patent. No. |             |                                     |                       |            | ISS                        | UE FEE              |  |
|  |             |                                     |                       |            | Amount Due                 | Date Paid           |  |
|  |             | (Primary                            | / Examiner)           | (Date)     | ISSUE BA                   | TCH NUMBER          |  |
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